

**MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

10/55/157

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/												
2	/												
3	/												
4	/												
5	/												
6	/												
7	/												
8	/												
9	/												
10	/												
11	/												
12	/												
13	/												
14	/												
15	/												
16	/												
17	/												
18	/												
19	/												
20	/												
21	/												
22	/												
23	/												
24	/												
25	/												
26	/												
27	/												
28	/												
29	/												
30	/												
31	/												
32	/												
33	/												
34	/												
35	/												
36	/												
37	/												
38	/												
39	/												
40	/												
41	/												
42	/												
43	/												
44	/												
45	/												
46	/												
47	/												
48	/												
49	/												
50	/												
TOTAL IND.													
TOTAL DEP.													
TOTAL CLAIMS													

BEST AVAILABLE COPY

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

10/55/159

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
101													
102													
103													
104													
105													
106													
107													
108													
109													
110													
111													
112													
113													
114													
115													
116													
117													
118													
119													
120													
121													
122													
123													
124													
125													
126													
127													
128													
129													
130													
131													
132													
133													
134													
135													
136													
137													
138													
139													
140													
141													
142													
143													
144													
145													
146													
147													
148													
149													
150													
TOTAL IND.	7												
TOTAL DEP.	8												
TOTAL CLAIMS	15												

BEST AVAILABLE COPY